

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**

 PAGE 1 OF 2  
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Democratic Congressional Campaign Committee</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00000935																									
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <table border="1" style="display:inline-table; margin:0 5px;"> <tr><td>M</td><td>M</td><td></td></tr> <tr><td></td><td></td><td></td></tr> </table> / <table border="1" style="display:inline-table; margin:0 5px;"> <tr><td>D</td><td>D</td><td></td></tr> <tr><td></td><td></td><td></td></tr> </table> / <table border="1" style="display:inline-table; margin:0 5px;"> <tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td></td><td></td><td></td><td></td><td></td><td></td></tr> </table>		M	M					D	D					Y	Y	Y	Y	Y	Y						
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D	D																										
Y	Y	Y	Y	Y	Y																						

Full Name of Payee <b>Bully Pulpit Interactive, LLC</b>			Date of Public Distribution/Dissemination <table border="1" style="display:inline-table; margin:0 5px;"> <tr><td>M</td><td>M</td><td></td></tr> <tr><td>02</td><td></td><td></td></tr> </table> / <table border="1" style="display:inline-table; margin:0 5px;"> <tr><td>D</td><td>D</td><td></td></tr> <tr><td>19</td><td></td><td></td></tr> </table> / <table border="1" style="display:inline-table; margin:0 5px;"> <tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td></td><td></td><td></td><td></td><td></td><td></td></tr> </table> <b>2014</b>			M	M		02			D	D		19			Y	Y	Y	Y	Y	Y						
M	M																												
02																													
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19																													
Y	Y	Y	Y	Y	Y																								
Mailing Address <b>1140 Connecticut Ave., NW Suite 800</b>			Amount <b>65000.00</b>																										
City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20036</b>	Transaction ID : <b>SE-917233</b>																										
Purpose of Expenditure <b>Media Buy</b>		Category/Type <b>004</b>	Date of Disbursement or Obligation <table border="1" style="display:inline-table; margin:0 5px;"> <tr><td>M</td><td>M</td><td></td></tr> <tr><td>02</td><td></td><td></td></tr> </table> / <table border="1" style="display:inline-table; margin:0 5px;"> <tr><td>D</td><td>D</td><td></td></tr> <tr><td>14</td><td></td><td></td></tr> </table> / <table border="1" style="display:inline-table; margin:0 5px;"> <tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td></td><td></td><td></td><td></td><td></td><td></td></tr> </table> <b>2014</b>			M	M		02			D	D		14			Y	Y	Y	Y	Y	Y						
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Name of Federal Candidate <b>David W. Jolly</b>			Office Sought: <input checked="" type="checkbox"/> House District: <b>13</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>FL</b> <input checked="" type="checkbox"/> Oppose																										
Calendar Year-To-Date Per Election for Office Sought <b>993052.23</b>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <b>2014</b> <input checked="" type="checkbox"/> Other (specify) <b>Special General</b>																										

Full Name of Payee <b>Ralston Lapp Media, LLC</b>			Date of Public Distribution/Dissemination <table border="1" style="display:inline-table; margin:0 5px;"> <tr><td>M</td><td>M</td><td></td></tr> <tr><td>02</td><td></td><td></td></tr> </table> / <table border="1" style="display:inline-table; margin:0 5px;"> <tr><td>D</td><td>D</td><td></td></tr> <tr><td>19</td><td></td><td></td></tr> </table> / <table border="1" style="display:inline-table; margin:0 5px;"> <tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td></td><td></td><td></td><td></td><td></td><td></td></tr> </table> <b>2014</b>			M	M		02			D	D		19			Y	Y	Y	Y	Y	Y						
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19																													
Y	Y	Y	Y	Y	Y																								
Mailing Address <b>1054 31st Street, NW Suite 430</b>			Amount <b>7011.02</b>																										
City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20007</b>	Transaction ID : <b>SE-917249</b>																										
Purpose of Expenditure <b>Media Production</b>		Category/Type <b>004</b>	Date of Disbursement or Obligation <table border="1" style="display:inline-table; margin:0 5px;"> <tr><td>M</td><td>M</td><td></td></tr> <tr><td>02</td><td></td><td></td></tr> </table> / <table border="1" style="display:inline-table; margin:0 5px;"> <tr><td>D</td><td>D</td><td></td></tr> <tr><td>18</td><td></td><td></td></tr> </table> / <table border="1" style="display:inline-table; margin:0 5px;"> <tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td></td><td></td><td></td><td></td><td></td><td></td></tr> </table> <b>2014</b>			M	M		02			D	D		18			Y	Y	Y	Y	Y	Y						
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Name of Federal Candidate <b>David W. Jolly</b>			Office Sought: <input checked="" type="checkbox"/> House District: <b>13</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>FL</b> <input checked="" type="checkbox"/> Oppose																										
Calendar Year-To-Date Per Election for Office Sought <b>993052.23</b>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <b>2014</b> <input checked="" type="checkbox"/> Other (specify) <b>Special General</b>																										

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<b>72011.02</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Kelly C. Ward

[Electronically Filed]

Date

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02		

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D	D	
20		

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Y	Y	Y	Y	Y	Y

**2014**

Signature

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
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 PAGE 2 OF 2  
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Democratic Congressional Campaign Committee</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00000935	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: flex; justify-content: space-between; width: 100%;"> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> </div>	

Full Name of Payee <b>Conversant, Inc.</b>			Date of Public Distribution/Dissemination MM / DD / YYYY <b>02 / 19 / 2014</b>		
Mailing Address 30699 Russell Ranch Road Suite 250			Amount <b>35000.00</b>		
City Westlake Village	State CA	Zip Code 91362	Transaction ID : SE-917248		
Purpose of Expenditure Media Buy		Category/Type <b>004</b>	Date of Disbursement or Obligation MM / DD / YYYY <b>02 / 18 / 2014</b>		
Name of Federal Candidate David W. Jolly		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <b>13</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>FL</b>		
Calendar Year-To-Date Per Election for Office Sought <b>993052.23</b>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▶ <b>Special General</b>		

Full Name of Payee			Date of Public Distribution/Dissemination MM / DD / YYYY		
Mailing Address			Amount		
City	State	Zip Code	Date of Disbursement or Obligation MM / DD / YYYY		
Purpose of Expenditure		Category/Type	MM / DD / YYYY		
Name of Federal Candidate		<input type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____		

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<b>35000.00</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<b>107011.02</b>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Kelly C. Ward

[Electronically Filed]

Date

 MM / DD / YYYY  
**02 / 20 / 2014**

Signature